NEIGHBORHOOD DEVELOPMENT FUND

Not-for-Profit Request 7-11-06 DATE: TO: Appropriations Committee FROM: Council Member RE: Request for Neighorhood Development Fund to be considered by the Appropriations Committee. I have reviewed the attached <u>Proposal</u> in the amount of \$\(\frac{4000}{000}\) through the \(\mathbb{N}\)\(\mathbb{F}\) School Supplies JCPEF and have found it complete and within our guidelines. I/We have read the organization's statement of public purpose to be furthered by the funds requested and I/We agree that the public purpose is legitimate. I/We have also completed the disclosure section below. Please add this Grant Proposal Agreement to the agenda of the next Appropriations Committee Meeting. Signature of Council Member **DISCLOSURE** List below any relation you have with the organization requesting the grant (your, your family, your legislative assistant or any city employee to this organization and to any member of the organization's board of directors or their employees.) Approved by:

Appropriations Committee Chairman

OFFICE OF METRO COUNCIL CLERK

RECEIVED

DATE 7/11/06 TIME: 12:09.pm

Date

LOUISVILLE METRO COUNCIL APPLICATION FORM FOR NEIGHBORHOOD DEVELOPMENT FUNDS (2006-2007)

Propo	osed Activity/Need: School Symphies for Warct 14 Schools
Name	of Applicant Agency: Jeff Co Public Ed Foundation
AMOL	JNT OF FUNDING REQUESTED \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
I.	Contact Person responsible for the Activity described in this proposal: A. Name LUNDA JOHNSON B. Title Division of Benelopment C. Phone # (502) 485 Col 36 Fax # (502) 485 8986 D. E-mail Linda Johnson of Jefferson, Kyschools W.
2.	If funded, this activity will further which of the major goals of Louisville Metro listed below.
	_Bringing Us Together
	_Keeping Us Safe
X	Promoting Education and Growing Jobs
*****	_Enhancing Neighborhoods and Protecting Our "Louisville" Quality of Life
3.	If funded, this activity will strengthen (check one):
X X X	Youth (teenagers, ages 13-19) Human Services (Citizens with barriers to meeting basic human needs) Arts/cultural Neighborhoods Business Associations Parks Community Activities and Events Other: if you do not believe your proposal fits any of the above, please describe the nature of your request:
4.	If approved, Louisville Metro Funds will be used for (check one)
У.	Operating Funds (cannot exceed 33% of agency's total budget) Programming/services/events for direct benefit to community or qualified individuals Capital equipment (small operating equipment which may be used to benefit the individuals or community being served. (No building or renovations)

5. PROPOSAL DESCRIPTION: Describe how you are going to further one of the four (, major goals of Louisville Metro Government by this proposal. (See #2) '
Children in reed will promote education
For the Children Served.
6. Describe the activity being proposed to address the goal. The fundy fesource centers at Valley then Dixis Elen 1 7051 mionie, warson lane stein Sanders Elem, Johnson town Elem, wiker Elem & Ersen Hower Elem will prohase School Sipplies for Children in reed.
7. Describe how the funding is to be used. BE SPECIFIC.
Chiprer (0000 nators will 1 Denty). Chipren who do not have school Subplied that Directore what is needed. Sacit School will received 500.00.
8. Describe the results/goals for this proposal. How will you know it is successful? POPPOSE SUPPOSE
 a. Participate in post-award training. b. Make all program and financial records available to any monitors from Louisville Metro to assure compliance with the approved funding.
 Failure to provide the services, programs or projects included in the agreement will result in funds being withheld, or in
requirement for reimbursing Louisville Metro. d. Return to Louisville Metro of any unexpended funds by July 31, 2007.
e. Documentation of all expenditures (canceled checks, receipts, paid invoices)
COMPLETE PAGE 3 -BUDGET SUMMARY STATEMENT FOR THIS PROJECT.
STAFF ONLY:
Description of Applicant Agency/Organization Complete
All documentation is attached: 501(c)3 status, Articles of Incorporation, Secretary of State status, EIN (Employer Identification Number)

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PROJECT/PROGRAM BUDGET SUMMARY STATEMENT '				
AGENCY NAME OF CO Public Ed Pan'				
Project/Program Name:	ct School,	a de la companya de l		
This Project/Program Proposal is #of\	- SOPILE			
	2006-2007	%		
REVENUES ANTICIPATED	Round to the nearest \$100	of Total Revenue		
Louisville Metro Government	116 6 00 1	10.01		
Requested of Metro Agency: Metro Council	\$ 4000	(00/0		
State of Kentucky				
Federal Government (Including Federal Page thru to State)				
(Including Federal Pass-thru to State) United Way				
Fees for Services				
Private Contributions				
Interest Income				
Other Sources				
(Please specify)				
TOTAL REVENUES	\$ 4,00000	100%		
OPERATING EXPENSES				
Personnel (including all fringes)				
Operating (Contractual and Supplies)	4,0000	100%		
Capital Equipment (Small Operating Equipment)				
Tomas operating Equipment)				
TOTAL EXPENDITURES	\$400000	100%		
Value of in-kind assets, such as donated space,				
supplies, use of equipment, etc.	\$			
Value of volunteer services and how computed:	\$			



SECTION ONE: DESCRIPTION OF APPLICANT AGENCY/ORGANIZATION

IDENTIFYING INFORMATION

1.	Official Name of Agency/Organization (Agency) as listed with the Kentucky Secretary of State: Jefferson County Public Education Foundation
	Organization number as listed with the Kentucky Secretary of State: 61-1021128
	List any "working" or "does business as" names for organization: - NA
IV.	Address of main office: (street and zip + 4) Jaeger Education Center, 502 Wood Road, Suite 201, Louisville, KY 40222
٧.	P. O. / mailing address if different: (zip + 4)
VI.	Phone # (502)_ 485-6636 Fax# (502)_ 485-8986
VII.	E-Mail Linda.Johnson@Jefferson.kvschools.us
VIII.	Agency's Legal Signatory/Title Name Orson Oliver I inda Johnson Title Chairman Director of Development
IX.	Contact person responsible for application: A. Name: Linda Johnson
	B. Phone # (502)_485-6636 Fax# (502)_485-8986
	C. E-Mail <u>Linda.Johnson@Jefferson.kvschools.u</u> s

DESCRIPTION OF AGENCY

I. Describe your Agency's vision, mission and services:

The Jefferson County Public Education Foundation was established in July 1983 to support priority initiatives and secure resources for the Jefferson County Public Schools.

Current Projects include Every 1 Reads (Initiative to ensure every student reads at grade level by2008), Starfish (a water safety program designed to give every child the chance to learn to swim), Basics for Kids Campaign (Clothing and basic school supplies for disadvantaged students), ExCEL awards (For outstanding teachers), and as a conduit for these other programs: AEGON awards, C.O.L.E.G.E. Bound, Scholarships/Memorials, and others.

II.	Total number of Board members _13			
20000 E	Number of Board meetings held to date in current fiscal year 2			
IV.	Average attendance at Board meetings			
FACI	LITIES List location(s) and terms (owned, rented, leased, or donated). A. NA B C D.			
II.	D. Are all facilities handicapped accessible? Yes X No			
III.	If no, please explain:			
FINAI	Agency's fiscal year from (month) to (month) to (month) Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? No Yesx If yes, please explainEvery 1 Reads Capital Campaign			
IV.	For the current fiscal year , list funds received from Louisville Metro Government, <u>including funds</u> from any department, office, etc. in either the former City of Louisville or Jefferson County. See Appendix for current list			
\$	- <u>0</u> Source:			

V.	Provide <u>one copy only</u> of each of the following, as appropriate (4 points): A. Articles of Incorporation. B. Approved budget or executive summary for your Agency's current fiscal year.	
	C. Proof of IRS 501(C) (3) status, or application for this IRS status, if applicable.	
	D. Staffing structure for entire Agency, including organizational chart.	
	E. Board member list; specify chair, vice-chair, secretary, and treasurer.	
	F. <u>If</u> your Agency is an employer required to have a written Affirmative Action/Equal	
	employment Opportunity policy: copy of policy. G. <u>If</u> rent/occupancy costs are being requested: copy of the signed lease.	
	H. If program participants have the opportunity to evaluate the services received: one	
	copy each of any forms used.	
VI.	List below any relationship any members of your Board of Directors or employees have with any Metro Council Member, Council Member's family, Council Member's staff, or any Louisville Metro Government employee.	: '
	JA – JCPEF does not engage in lobbying activities	
VII.	I certify under the penalty of law that the information in this application is accurate to the best of my knowledge. I am aware that my Agency will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. If further certify that I am authorized to sign this application for the Agency.	f
Name	of Legal Signatory: (type or print) <u>Hude JOHNSon</u> Live OHNSon	\
Title:	Drantor & Development	
Signa	ire Lide Al	
Date	1,10,06	

Internal Revenue Service District Director

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Department of the Treasury

Date:

A LANGE OF THE STATE OF THE STA

JUL 19 1983

Employer Identification Number:
61-1021128
Accounting Period Ending:
June 30
Form 990 Required:

Yes No

Jefferson County Public Education Foundation, Inc. 416 West Jefferson Louisville, KY 40202 Person to Contact:
Marilyn Miller
Contact Telephone Number:
(513) 684-3578

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(3).

If your sources of support, or your purposes, character, or method of operatio change, please let us know so we can consider the effect of the change on your exempt status and foundation status. Also, you should inform us of all changes in your name or address.

Generally, you are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. If you have paid FICA taxes without filing the waiver, you should contact us. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxe: under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Code Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

The box checked in the heading of this letter shows whether you must file Form 990. Return of Organization Exempt from Income tax. If Yes is checked, you are required to file Form 990 only if your gross receipts each year are normally more than \$10,000. If a return is required, it must be filed by the 15th day of of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter, we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees.

If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours

James J. Ryan U District Director

This supersedes our letter of July 1, 1983 in which we classified your non-private foundation status under section 509(a)(1) and 170(b)(1)(A)(vi).

For tax years ending on or after December 31, 1982, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000, instead of \$10,000 as indicated above.

Beginning January 1, 1984, unless specifically excepted, you must pay taxes under the Federal Insurance Contributions Act (social security taxes) for each employee who is paid \$100 or more in a calendar year.

cc: G. Alexander Hamilton
Wyatt, Tarrant & Combs
Citizens Plaza
Louisville, KY 40202

Current Board of Directors Jefferson County Public Education Foundation

SAM CORBETT, CHAIRMAN

SAM MEYERS
3400 BASHFORD AVENUE COURT
LOUISVILLE KY 40218
459-4885 Work/473-1129 Fax
sctuxedo@AOL.com

JAMES R. ALLEN, VICE CHAIRMAN

HILLIARD LYONS 501 SOUTH FOURTH AVENUE LOUISVILLE KY 40202 588-8604/585-8901 Fax JAllen@hilliard.com

JOE SEILER, SEC/TREASURER

NATIONAL CITY BANK 31T09B 101 S. 5TH STREET 9TH FLOOR LOUISVILLE KY 40202 581-4331 Work/581-5160 Fax joe.seiler@nationalcity.com

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LOUISVILLE KY 40202
584-6349 Work
Claire@bittners.com

MIKE BROWN

PEPSI-COLA GENERAL BOTTLERS PO BOX 37150 LOUISVILLE KY 40233 368-2581/Ex 228 mike.brown@pepsiamericas.com

KEVIN HABLE

WYATT TARRANT & COMBS 500 W. JEFFERSON STREET LOUISVILLE KY 40202 589-5235/589-0309 Fax khable@wyattfirm.com

AUDWIN HELTON

SPATIAL DATA INTEGRATIONS INC 710 WEST MAIN STREET SUITE 108 LOUISVILLE KY 40202 568-2591 Work/568-6929 Fax ahelton@sdimaps.com

HENRY HEUSER, JR.

UNISTAR/VOGT 222 S. FIRST STREET LOUISVILLE KY 40202 635-3229 Work/Fax 635-3022 /Cell 553-2270 hheuser@unistarllc.com

STEVE LANGFORD

WAVE TV3 PO BOX 32970 LOUISVILLE KY 40232 561-4139 Work/548-5934 Cell slangford@wave3tv.com

ORSON OLIVER

325 W. MAIN ST. #1810 LOUISVILLE KY 40202 553-1464(cell)/584-7062 & 584-5984 ooliver@schneidercompanies.com dbondehagen@schneidercompanies.com Home: 141 N. 4th Street, Apt. 643 Louisville, KY 40202

JOAN RIEHM

DEPUTY MAYOR 527 W. JEFFERSON ST. 4TH FLOOR LOUISVILLE KY 40202 574-8141/574-5354 Fax Joan.Riehm@loukymetro.org

PAUL THOMPSON

E.ON U.S. LLC 220 W. MAIN STREET LOUISVILLE KY 40202 627-3861/627-2995 Fax Paul.thompson@eon-us.com

MATT THORNTON

THORNTON OIL CORP.

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Dr. Stephen Daeschner Superintendent Jefferson County Public Schools 3332 Van Hoose Education Center Louisville, KY 40218

Marty Bell Community Relations Jefferson County Public Schools 3332 Van Hoose Education Center Louisville, KY 40218